NOV 1 8 2005

PTO/SB/30 (04-05)
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Request
For

## Continued Examination (RCE) Transmittal

Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Application Number	10/721,744-Conf. #3947
Filing Date	November 26, 2003
First Named Inventor	Donald L. Yates
Art Unit	2818
Examiner Name	D. A. Le
Attorney Docket Number	M4065.0530/P530-A

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant ins applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request amendment(s).	instructs otherwise. If
a. Previously submitted. If a final Office action is outstanding, any amendments filed after may be considered as a submission even if this box is not checked.	er the final Office action
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on	
ii. Other	
b. x Enclosed	
i. X Amendment/Reply iii. Information Disclosure Statement (ID	(IDS)
ii. Affidavit(s)/Declaration(s) iv. Other	
2. Miscellaneous	
a. Suspension of action on the above-identified application is requested under 37 CFR 1.1	1.103(c) for a
period of months. (Period of suspension shall not exceed 3 months; Fee under 3	r 37 CFR 1.17(i) required)
b. Other	
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.	
a. The Director is hereby authorized to charge the following fees, any underpayment of fee	fees, or credit any
overpayments to Deposit Account No I have enclosed a duplicate	
i. X RCE fee required under 37 CFR 1.17(e)	
ii. Extension of time fee (37 CFR 1.136 and 1.17)	
iii. Other	
b. Check in the amount of \$ enclosed	
c. X Payment by credit card (Form PTO-2038 enclosed)	
<u> </u>	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED	
Signature Date November 1	1 <b>%</b> , 2005
Name (Print/Type) Peter McGee Registration No. 35,	5,947

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NOV 1 8 2005	aduction Act of 1995	, no person are requ	iired to resp	U.S. Patent	and Tradem	oved for use throug park Office; U.S. DE ion unless it display	h 7/31/2006. PARTMENT	OF COMMERC	
PADEMARY	ctive on 12/08/2004				Con	nplete if Know	/n		
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			1818). A	pplication Num		10/721,744-Cd		7 	
FEE TRANSMITTAL				Filing Date		November 26, 2003			
Fo	r FY 200	5		First Named Inventor		Donald L. Yates			
Applicant claims small entity status. See 37 CFR 1.27				xaminer Name rt Unit		D. A. Le 2818			
TOTAL AMOUNT OF PAYMENT (\$) 790.00				ttorney Docket	No.	M4065.0530/P530-A			
METHOD OF PAYM	ENT (check all t	hat apply)							
Check X Credi		Money Order	None osit Accoun		please iden ckstein S	tify): hapiro Morin 8	k Oshinsk	/ LLP	
X Charge an	e(s) indicated be	low s) or underpayme		<u> </u>	e fee(s) ind	dicated below, ex		he filing fee	
FEE CALCULATION						<u>.</u>			
BASIC FILING, SEAF     Application Type     Utility	•	G FEES Small Entity	•	CH FEES  Small Entity Fee (\$)  250	EXAMIN Fee (\$) 200	NATION FEES  Small Entity Fee (\$)  100		Paid (\$)	
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEE Fee Description	s						Fee (\$)	Small Entity Fee (\$)	
Each claim over 20 (inc	uding Reissues)	)					50	25	
Each independent claim	•	ig Reissues)					200	100	
Multiple dependent clair	ns						360	180	
	tra Claims F	ee (\$)	Fee Pai	d (\$)	_	ultiple Depende ee (\$)	ent Claims Fee Paid (		
Indep. Claims Ex	tra Claims F	ee (\$)	Fee Pai	d (\$)					
3. APPLICATION SIZE I If the specification and listings under 37 CF sheets or fraction th	drawings excee R 1.52(e)), the	application size	fee due i	s \$250 (\$125 f				0	
Total Sheets	Extra Sheets			tional 50 or frac		<del></del>	Fee	Paid (\$)	
4. OTHER FEE(S)				ound up to a who	le number)	x	Fees	Paid (\$)	
Non-English Specific Other (e.g., late filing	•	` -	•	•	ion (RCF	(see 37	79	0.00	
- Carer (e.g., rate ming	7		. 55716110			-, (555 57			

SUBMITTED BY		/	71/	is a second				
Signature	/ <i>/</i> /	1 %	70	/	Registration No. (Attorney/Agent)	35,947	Telephone	(202) 828-2232
Name (Print/Type)	Peter I	McGee					Date	November 18, 2005